



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9692

SERIAL NUMBER 09/883,294	FILING DATE 06/19/2001 RULE	CLASS 375	GROUP ART UNIT 2631	ATTORNEY DOCKET NO. 3670-34						
APPLICANTS Sten Sjoberg, Landvetter, SWEDEN; Ulf Hansson, Lerum, SWEDEN; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** SWEDEN 0002332-5 06/20/2000 IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/10/2001										
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY SWEDEN	SHEETS DRAWING 3	TOTAL CLAIMS 4	INDEPENDENT CLAIMS 1					
ADDRESS NIXON & VANDERHYE, P.C. 8th Floor 1100 North Glebe Road Arlington ,VA 22201-4714										
TITLE Device for narrow-band communication in a multi-carrier system										
FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
<input type="checkbox"/> All Fees										
<input type="checkbox"/> 1.16 Fees (Filing)										
<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)										
<input type="checkbox"/> 1.18 Fees (Issue)										
<input type="checkbox"/> Other _____										
<input type="checkbox"/> Credit										